

**Testimony of Susan Lloyd Yolen, Vice President,
Public Affairs & Communication, Planned Parenthood of Connecticut
March 2, 2009, Joint Meeting of Human Services, Public Health and Insurance Committees
SB 819, An Act Concerning Improvements to the HUSKY Program**

Good morning, distinguished chairs and members of the various committees, and thank you for this opportunity to address SB 819 and the issue of improvements to the HUSKY program. My name is Susan Yolen and I am the Vice President for Public Affairs & Communication for Planned Parenthood of Connecticut, the state's largest provider of family planning and reproductive health care.

It's my assumption that "improvements to the HUSKY program" could include saving the state dollars, and throughout this session I have been reminding legislators that in 2005, the General Assembly directed the Department of Social Services to apply for a federal 1115 family planning expansion waiver. A family planning expansion works this way: by covering just the medical services considered "family planning" for a young, low income population not otherwise eligible for Medicaid (primarily women *without* children) we can prevent unintended pregnancy and save money by keeping these clients from requiring HUSKY A coverage.

In 2005, state lawmakers were compelled by the fact that family planning, already a mandated benefit under Medicaid, has a **90 cents to the dollar** reimbursement rate...far greater than the federal match for other Medicaid services. *Twenty seven other states* have implemented family planning expansions, saving millions of dollars in Medicaid funds. Most are eagerly applying to renew these waivers once they have expired. In Connecticut, four years after passage of legislation approving such a waiver, we're still waiting for ours to be sent to CMS for approval.

We know that DSS prepared an excellent family planning waiver request back in 2006, which was sent to CMS for preliminary review, but was returned for revisions, and was not re-submitted. The new Administration in Washington considers family planning an essential health service for women of reproductive age as well as a significant cost saving measure worth expanding. There is currently enthusiastic support in Washington for these programs.

According to the Guttmacher Institute at least *four public dollars are saved for every public dollar spent on family planning*...when the Medicaid-covered costs of unplanned pregnancy are avoided. A CMS funded national evaluation found that programs in six states they studied yielded significant savings to both the federal government and the states. \$19 million was saved in a single year in Alabama, and \$30 million in Arkansas. The savings these programs generate by helping women avoid unintended pregnancies and Medicaid-funded deliveries far outstrip the costs of providing the family planning care to the enrollees. Here in Connecticut, Planned Parenthood centers are already seeing the results of young women losing jobs and health insurance: more are coming to us unable to pay for exams and monthly contraceptive supplies. For most families, the timing could not be worse for an unplanned pregnancy. A proactive approach to expanding family planning services is a reasonable and necessary response to our times.

We ask that this committee re-direct the Department of Social Services to forward the state's family planning waiver request to CMS by upon passage of this bill or, at the latest, by July 1, 2009. We also ask that the final proposal establish parity between the income ceiling for pregnancy care under Medicaid, and the ceiling for family planning eligibility, at 250% of the federal poverty level. Thank you.